



## DOMESTIC VIOLENCE SHELTER PROGRAM SERVICE PLAN FISCAL YEAR 2003-2004

### A. BACKGROUND/EXPERIENCE

Please provide an explanation if the answers to any of these four questions are "Yes." (If "Yes", attach relevant letters or documents as a separate attachment)

1. Has the organization's nonprofit status changed?

\_\_\_\_\_ Yes

\_\_\_X\_\_\_ No

2. Has the organization failed or refused to complete a contract during the past year?

\_\_\_\_\_ Yes

\_\_\_X\_\_\_ No

3. Is the organization currently involved in any litigation in connection with a contract?

\_\_\_\_\_ Yes

\_\_\_X\_\_\_ No

4. Is the organization currently delinquent in paying its State/Federal payroll taxes?

\_\_\_\_\_ Yes

\_\_\_X\_\_\_ No

Describe (if "Yes"):

### B. SHELTER DESCRIPTION

1. What is the maximum number of beds available at the shelter? \_\_\_\_\_ **25**

2. Describe the location of and services provided at the shelter facility: **Confidential location in residential area of Hesperia, San Bernardino County, California. Large residential home with several bedrooms, large communal dinning area, kitchen, and living room. In-house advocate office is also used for individual case management and shelter manager's office doubles as professional counseling space. Fenced playground, entire property is fences and gated. Full security system.**

3. How long has the agency's shelter program existed? \_\_\_\_\_ **18 years**

### C. OUTREACH CENTER DESCRIPTION

1. Describe your agency's outreach/drop-in center (including location): Located at 15075 7<sup>th</sup> Street, Victorville, Ca. Available to the public through walk-in and by appointment. Private office spaces classroom space, dedicated supervised visitation area. Located on Main thoroughfare on local transit route ½ block from nearest bus stop.
2. Describe the services provided at outreach/drop-in center: Outreach services include public education, resources and referrals, speakers, and volunteer training. Weekly counseling groups (both English and Spanish). Restraining order assistance by appointment. Supervised visitation program. Individual case management.
3. Please indicate hours of operation for your agency's outreach/drop-in center on the chart below:

Day of the Week	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Availability (Ex: 8 a.m. to 5 p.m.)	closed	8:00-5:00	8:00-5:00	8:00-5:00	8:00-5:00	8:00-5:00	10:00-4:00 (visitation)

### D. PROGRAM SERVICES AND SERVICE DELIVERY TARGETS

1. Indicate the number of adults and children you will be able to serve in the shelter during the contract year.  
Adults 150 Children 200
2. Project the number of hours clients will receive in services during a contract year.  
Client hours 2346 Shelter Hours 126,000
3. Which of the following services will be provided to victims of Domestic Violence during the contract year? (Provide a detailed description of these services )

- a. Intake and admission to the shelter on a 7 day per week, 24 hours per day basis.

X  Yes

No

Describe:

**Shelter advocates, supervised by shelter manager, provide 24-hour client intake and daily management of facility. We accept referrals from hotline calls, from other agencies, police, etc. Bilingual assistance is available on hotline and at shelter and outreach for intake procedures.**

- b. A crisis hotline 7 days per week, 24 hours per day. Identify if program staff or trained volunteers will operate the crisis hotline?

X  Yes

No

Describe:

**Trained staff and volunteers provide counseling, support, information and referrals through our 24-hour crisis hotline. We estimate 2500 hotline calls per year. Bilingual staff is available at all times. All**

interviews for shelter intake are completed through hotline. Hotline can be answered at shelter facility, outreach center, or by personal or cellular phone. This allows constant hotline coverage.

c. Temporary housing and food facilities.

☒ Yes

☐ No

Describe:

**We offer 30-day emergency shelter to battered women and their children. Residents receive 3 meals and snacks each day, emergency clothing and toiletries. Individual case management services include goal setting, resources and referrals, assistance with housing, transportation for relocation, and household assistance upon departure. Our shelter offers a family-like environment despite a security fence, alarm system, and 24-hour staff. The facility is approximately 3000 square feet with a large enclosed playground and storage.**

d. Psychological support and peer counseling.

☒ Yes

☐ No

Describe:

**Clients receive peer and professional counseling in both group and individual settings. A licensed counselor facilitates individual sessions and provides input regarding each client's status as well as recommending specific courses of action (i.e.-extension of stay for further counseling, referral to further psychological support, etc.). Group support sessions, facilitated by staff, allow clients to learn the dynamics of domestic violence and gain support from fellow residents. Peer counseling is also provided at the Outreach Center for post-crisis victims and those not in shelter. We also offer bi-weekly peer groups through Victor Valley College.**

e. Ensure school aged children continue their education during their stay in the shelter as required by the Education Code by making arrangements with schools, providing lunches and transportation as necessary, or taking other actions as required.

☒ Yes

☐ No

Describe:

**We offer on-site childcare for shelter clients. School-age children are enrolled and transported (with lunches) to local schools or provided in-home educational materials through the school system. Children's advocate assists children with schoolwork and supports mothers as they work with their children (especially those who are being home-schooled).**

f. Emergency transportation to the shelter and when appropriate, make arrangements with local enforcement agencies for assistance in providing such transportation.

☒ Yes

☐ No

Describe:

**We offer emergency transportation to women and children, both to come into the shelter and during their stay for court accompaniment, medical, legal, and social services appointments. We work with San Bernardino County domestic violence agencies as well as those located in CA, AZ, and NV to provide for the safe relocation of families in danger. This includes transportation by shelter vehicle, purchase of bus tickets and local transit.**

- g. Refer residents to existing services in the community as appropriate, and follow-up on the outcome of such referrals.

  X   Yes

       No

Describe:

**The Outreach program actively participates in networking for resources and referrals for public and private services to respond to the needs of all domestic violence victims. These individuals rely on a coordinated referral system which focuses on safety and ready assistance. Callers and drop-in clients are referred to existing community services. Shelter residents are assisted by case management and follow-up services are provided after they leave shelter. An updated resource book is used by both the Outreach office and crisis hotline to provide immediate response.**

- h. Outreach/drop-in center to assist victims of domestic violence who have not yet made the decision to leave their homes, or who have found other shelter but who have a need for support services.

  X   Yes

       No

Describe:

**The Outreach Center provides referrals, resources, and information as well as coordinating community educational opportunities and speakers. Educational materials are distributed and training opportunities for staff, volunteers, and the community are presented. Assistance with Temporary Restraining Orders is also provided by appointment. Weekly peer counseling groups and individual support sessions are also offered at the Outreach Center. Charitable donations are accepted here as well.**

## **E. OTHER DOMESTIC VIOLENCE SERVICES**

1. Will the following services, to the extent possible and in conjunction with existing community resources, be provided or arranged for during the contract year? (Please explain any "No" answers)

a. Medical Care.   X   Yes        No

b. Legal Assistance.   X   Yes        No

c. Psychological Support.   X   Yes        No

- d. Information regarding re-education, marriage and family counseling, job counseling and training programs, housing referrals and other available social services.

  X   Yes

       No

Describe (if "No"):

2. What criteria will victims of Domestic Violence be required to meet in order to be eligible for program services? Include criteria for both children and adults.

**All battered adults are eligible for outreach services. Battered women and their children are eligible for shelter services. Shelter services available to children regardless of age or gender must accompany mother. We do not discriminate on the basis of race, color, ethnicity, creed, national origin, sexual orientation, socio-economic status, disability or age. All clients are required to receive counseling which is explained in the intake process.**

3. Specify conditions under which victims of Domestic Violence who otherwise appear to meet the criteria listed in #2 above may be refused services.

**If shelter is full, we are not able to provide room. If other services, not required by us, are required for the welfare and safety of the clients, we will refer to other resources.**

4. List all fees, assessments and all other cost, charges or expenses victims of Domestic Violence will be expected to pay to the program during their stay in the shelter.

**All services are provided free of charge. Supervised visitation families pay for those visits as required by court order.**

5. Provide information on the number of volunteers to be recruited and utilized in the program and the number of volunteer hours of service you expect to have donated to the program during the Contract year. Describe duties which volunteers will be assigned.

**We currently have 12 volunteers. We plan to recruit 5-10 additional volunteers during this contract year.**

**All volunteers receive mandated 40hours domestic violence counseling training. We anticipate 2500 volunteer service per year with crisis hotline, transportation for clients, outreach office support, speakers, special events, Board members, abuse response teams, visitation monitors, and facility maintenance.**

6. What other services not previously described will be provided as a part of the Domestic Violence Program?

**Immediate response to requests for services at doctors offices, hospitals, schools, retail stores, etc. We will send an advocate or team to meet with client, assess needs, offer information, transport to shelter, etc. We collaborate with Victor Valley Domestic Violence Program to provide a twice weekly Temporary Restraining Order Clinic at the local Court House. Supervised visitation program at Outreach Center.**

**HIGH DESERT DOMESTIC VIOLENCE PROGRAM, INC.**  
**DOMESTIC VIOLENCE SHELTER PROGRAM BUDGET**  
**July 1, 2003 – June 30, 2004**

**I. PROGRAM COSTS**

List only those items of cost which are chargeable, in whole or part, to the program

**A. Salaries and Benefits**

(1)

(2)

(3)

<b>COST ITEM</b>	<b>TOTAL COST TO THE ORGANIZATION</b>	<b>% OF TOTAL COST CHARGED TO GRANT</b>	<b>COST CHARGED TO GRANT</b>
1. Job Title: Legal Advocate	\$25,958	25%	\$6,489
Salary: \$21,632			
Benefits: \$4,326 (20%)			
2. Job Title: Children's Advocate	\$17,971	100%	\$17,971
Salary: \$14,976			
Benefits: \$2,995 (20%)			
3. Job Title: Bookkeeper/Office Mgr	\$15,600	25%	\$3,900
Salary: \$13,000			
Benefits: \$2,600 (20%)			
4. Job Title:			
Salary:			
Benefits:			
5. Job Title:			
Salary:			
Benefits:			
<b>SUBTOTALS</b>	<b>\$59,529</b>		<b>\$28,360</b>

**B. Operational Costs**

(1)

(2)

(3)

(4)

<b>COST ITEM</b>	<b>TOTAL COST TO THE ORGANIZATION</b>	<b>% OF TOTAL COST CHARGED TO GRANT</b>	<b>COST CHARGED TO GRANT</b>
1. Office Supplies	\$3,000	25%	\$750
2. Postage	\$1,000	25%	\$250
3. Utilities	\$6,000	25%	\$1,500
4. Educational Materials	\$5,000	25%	\$1,250
5. Indirect	\$1,400	10%	\$140
6. Client Services (bus passes, etc)	\$5,000	100%	\$5,000
7. Telephone	\$4,000	25%	\$1,000
8. Shelter Computer and Software	\$1,000	100%	\$1,000
9. Audit	\$5,000	25%	\$1,250
10.			
11.			
12.			
13. SUBTOTALS	\$31,400		\$12,140
14. SUBTOTALS, (A) above	\$59,529		\$28,360
15. TOTALS	\$90,929		\$40,500

## II INCOME TO SUPPORT THE PROGRAM

List cash income to the organization which is allocated in whole or part to support the proposed program

(1) SOURCE OF INCOME	(2) TOTAL RECEIVED BY ORGANIZATION	(3) PERCENT TO THE PROGRAM	(4) AMOUNT TO PROGRAM
1 Other Revenue	\$330,000	100%	\$330,000
2 Supervised Visitation Fees	\$4,000	100%	\$4,000
3			
4			
5			
6 Total *	\$334,000		\$334,000

## III CASH/IN-KIND TO MEET REQUIRED MATCH

List all cash/in-kind income which will be used to provide the required 10% match.

Attach an explanation of how the value of each in-kind item was determined.

(1) SOURCE OF CASH INCOME	(2) AMOUNT NON-GOVERNMENTAL
1 Public/Private Contributions	\$10,000
2	
3	
4	
5	
6 TOTAL	\$10,000

(3) SOURCE OF IN-KIND (NON-CASH) INCOME	(4) VALUE
1 Furniture/Clothing Donations	\$68,000
2 Volunteer Hours	\$16,200
3	
4	
5	
6 TOTAL	\$94,200